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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. VPI/98-21 DIV US

First Inventor David Lauffer

Title N-Substituted Glycine Derivatives

Express Mail Label No. EV 317 172 881 US

US PTO  
10/6/01  
039701501**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original, and a duplicate for fee processing)*
- Applicant claims small entity status.  
See 37 CFR 1.27.
- Specification [Total Pages **35**]  
*(preferred arrangement set forth below)*
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings *(if filed)*
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets ]
- Oath or Declaration [Total Pages **3**]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 18 completed)*
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:** MS Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

7.  CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*
8.  Nucleotide and/or Amino Acid Sequence Submission *(If applicable, all necessary)*
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or ii.  paper
    - c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATIONS PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement *(when there is an assignee)*  Power of Attorney
11.  English Translation Document *(if applicable)*
12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
15.  Certified Copy of Priority Document(s) *(if foreign priority is claimed)*
16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other:  Express Mail Cover Sheet

18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation  Divisional  Continuation-in-part (CIP) of prior application No.: **10/039,896**
Prior application information: Examiner **Hong Liu** Group / Art Unit: **1624**

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**
 Customer Number or Bar Code Label **27916** or  Correspondence address below

Name	Nandakumar Govindaswamy Vertex Pharmaceuticals Incorporated				
Address	130 Waverly Street				
City	Cambridge	State	Massachusetts	Zip Code	02139-4242
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Name (Print/Type)	Nandakumar Govindaswamy	Registration No. (Attorney/Agent)	Ltd. Recognition	
Signature			Date	October 2, 2003

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11696 U.S. PTO  
100203

# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

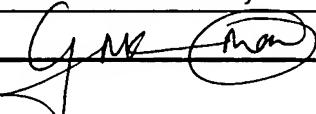
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27
<b>TOTAL AMOUNT OF PAYMENT</b>	
(\$ ) 1,132.00	

Complete if Known	
Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	David Lauffer
Examiner Name	Hong Liu
Group Art Unit	1624
Attorney Docket No.	VPI/98-21 DIV US

METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)												
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None	3. ADDITIONAL FEES												
<input checked="" type="checkbox"/> Deposit Account					<table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Fee Code</td> <td>Fee (\$)</td> <td>Fee Code</td> <td>Fee (\$)</td> <td>Fee Description</td> <td>Fee Paid</td> </tr> </tbody> </table>					Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Large Entity	Small Entity																
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid												
Deposit Account Number					50-0725	1051	130	2051	65	Surcharge - late filing fee or oath							
Deposit Account Name					Vertex Pharmaceuticals	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.							
<p>The Commissioner is hereby authorized to: (check all that apply)</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/> Charge fee(s) indicated below</td> <td><input checked="" type="checkbox"/> Credit any overpayments</td> </tr> <tr> <td><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</td> <td></td> </tr> </table> <p>to the above-identified deposit account.</p>										<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments	<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
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FEE CALCULATION																	
1. BASIC FILING FEE																	
Large Entity		Small Entity															
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		Fee Paid											
1001	770	2001	385	Utility filing fee		770.00											
1002	340	2002	170	Design filing fee													
1003	530	2003	265	Plant filing fee													
1004	770	2004	385	Reissue filing fee													
1005	160	2005	80	Provisional filing fee													
				SUBTOTAL (1)	(\$ )	770.00											
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																	
				Extra Claims	Fee from below	Fee Paid											
Total Claims	24	-20** =	4	x 18.00	=	72.00											
Independent Claims	1	-3** =	0	x 86.00	=	0.00											
Multiple Dependent				290.00	=	290.00											
Large Entity		Small Entity															
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description													
1202	18	2202	9	Claims in excess of 20													
1201	86	2201	43	Independent claims in excess of 3													
1203	290	2203	145	Multiple dependent claim, if not paid													
1204	84	2204	42	** Reissue independent claims over original patent													
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent													
				SUBTOTAL (2)	(\$ )	362.00											
** or number previously paid, if greater; For Reissues, see above																	
*Reduced by Basic Filing Fee Paid																	
SUBTOTAL (3) (\$ )																	

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Nandakumar Govindaswamy	Registration No. (Attorney/Agent)	Ltd. Recognition	Telephone	(617) 444-6619
Signature				Date	October 2, 2003

Docket No.: VPI/98-21 DIV US

**Certificate Of Mailing Under 37 C.F.R. § 1.10**

Express Mailing No. EV 317 172 881 US

Date of Deposit: October 2, 2003

I hereby certify that the following documents:

1. Utility Patent Application Transmitta (1 page);
2. Fee Transmittal Sheet (1 page, in duplicate);
3. Copy of Specification 35 pages (Desc. 26 pgs., claims 8 pgs., Abstract 1 pg);
4. Copy of executed Declaration Power of Attorney document (3 pages);
5. Information Disclosure Statement (in duplicate);
6. PTO-1449 Form (in duplicate); and
7. this return postcard receipt

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to the MS Patent APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Karen DiRocco  
(type or printed name of person mailing document(s))

  
(signature of person mailing document(s))

